

Docket No. PU4070US2

Declaration And Power Of Attorney For Patent Application English Language Declaration

As below named inventor. I hereby declare that:

the specification of which (check only one item below):

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS, SYSTEMS, AND COMPUTER PROGRAM PRODUCTS FOR IDENTIFYING CONDITIONAL ASSOCIATIONS AMONG FEATURES IN SAMPLES

*						
[]is attached hereto.	•					
OR	January 11 2002	_as United States	annlication Cari	al Na	10/044 680	or PCT
[X] was filed on International	January 11, 2002	_as Officed States	application Seri	ai 190	10/044,080	01101
Application Number	PCT/ _(if applicable)	_filed	and was amer	nded on (I	MM/DD/YYYY)	
I hereby state that I has amended by any ar				identified	l specification, inc	luding the claims,
I acknowledge the du patentability as define		Jnited States Pater	nt and Trademar	k Office a	all information wh	ich is material to
I hereby claim foreign or inventor's certifica United States of Ame patent or inventor's co which priority is clain	te or 365(a) of any Porica, listed below and ertificate or of any PO	CT international application of the contract o	pplication which ied below, by ch	designat	ed at least one cou e box, any foreign	intry other than the application for
Prior Foreign Application		Country		_	Filing Date	PRIORITY
Number (s)				(MM/D	D/YYYY))	CLAIMED
1.						
2.						
2. 3. 4. 5.						
4.						
				_		
I hereby claim the benefit und	er Title 35, United St	ates Code §119(e)	of any United S	tates pro	visional applicatio	n(s) listed below:
Application N	ło.	Filing	g Date (MM/DD	/YYYY)		
1. 60/262,580			01/17/2001			
2.						
3.						
4. 5.						
5.						

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PU4070US2

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT

international filing date of this application:							
PRIOR U.S. PARENT APPLICATION	or PCT PARENT APPLICAT	ION					
		5	STATUS (Check	one)			
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED			
POWER OF ATTORNEY: As a named invent in the property of the U.S. Patent and Trademark Office connected in the U.S. Patent and Trademark Office con							
Send Correspondence to: Direct Telephone Calls to: Frank P. Grassler 919-483-2482							
and belief are believed to be true statements and the like so made a	nts made herein of my own knowler; and further that these statements are punishable by fine or imprisor pardize the validity of the application.	s were made with the nment, or both, under	knowledge that was 18 U.S.C. 1001,	villful false			

			THE CHIEF NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	
2	OF INVENTOR	KEEFER	Christopher	E
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box		
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	YOUNG	Sidney	Stanley
_	INVENTOR'S	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		DATE: 44 A4 A A
	SIGNATURE	files the your	7	DATE: 11 March 02
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	_	
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	XIA	Tai-he	<u> </u>
	INVENTOR'S			DATE:
	SIGNATURE			<u> </u>
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Montgomery	NJ	P.R. China
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	71 Southfield Drive	Montgomery	N.J. 08502 US



Docket No. PU4070US2

Declaration And Power Of Attorney For Patent Application English Language Declaration

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS, SYSTEMS, AND COMPUTER PROGRAM PRODUCTS FOR IDENTIFYING CONDITIONAL ASSOCIATIONS AMONG FEATURES IN SAMPLES

the specification of which (check only one item below):						
[]is attached hereto. OR						
[X] was filed on International	January 11, 2002	_as United Sta	ites application Ser	ial No	10/044,680	or PCT
Application Number	PCT/ (if applicable)	_filed	and was ame	nded on (MM/DD/YYYY)	
I hereby state that I has amended by any an				-identified	d specification, inc	cluding the claims,
I acknowledge the dur patentability as define		Inited States Pa	atent and Trademan	k Office	all information wh	nich is material to
I hereby claim foreigr or inventor's certificat United States of Ame patent or inventor's ce which priority is clain	e or 365(a) of any Porica, listed below and entificate or of any PC	CT international have also ider	al application which attified below, by ch	n designat necking th	ted at least one con ne box, any foreign	untry other than the n application for
Dais Danies Australia		\		F	Eiling Date	DDIODITY
Prior Foreign Application Number (s)		Country		_	Filing Date D/YYYY))	PRIORITY CLAIMED
				(1.11.2.2	<u> </u>	<u> </u>
1. 2.						
3.						
4.						
5.						
I hereby claim the benefit unde						on(s) listed below:
Application N	o.	Fi	ling Date (MM/DD)/YYYY)		
1. 60/262,580	·		01/17/2001			
2.						
3. 4.						
<u>4.</u> 5.						
5.	1				l	

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PU4070US2

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION of	or PCT PARENT APPLICAT	ION			
		5	STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	
			* **		
POWER OF ATTORNEY: As a named inventor, I the U.S. Patent and Trademark Office connected there	HE PARTY IN THE ATTENTION OF A STREET OF THE) and/or agent(s) to prosecu per)	ite this application and	transact all business in	

23347

PATENT TRADEMARK OFFICE

Send Correspondence to:



PATENT TRADEMARK OFFICE

Direct Telephone Calls to:

Frank P. Grassler 919-483-2482

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	THE STANE	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
_	FULL NAME			E.
2	OF INVENTOR	KEEFER	Christopher	
	INVENTOR'S	11=0 / 1/1		DATE: 03 - 1/ 3 - 0
	SIGNATURE	Chthe G. Kufe		03-11-2002
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC .	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box		
		· · · · · · · · · · · · · · · · · · ·		
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	YOUNG	Sidney	Stanley
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC .	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
-		Five Moore Drive, PO Box		
		· · · · · · · · · · · · · · · · · · ·		
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	XIA	Tai-he	
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Montgomery	NJ	P.R. China
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	71 Southfield Drive	Montgomery	N.J. 08502 US
ر	MUDICOS	/ I Southfield Dilive	I Madridonici j	A 1101 00002 00



Docket No. PU4070US2

Declaration And Power Of Attorney For Patent Application

English Language Declaration

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS, SYSTEMS, AND COMPUTER PROGRAM PRODUCTS FOR IDENTIFYING CONDITIONAL ASSOCIATIONS AMONG FEATURES IN SAMPLES

the specification of w	hich (check only on	e item below):			
[]is attached hereto. OR					
[X] was filed on International	January 11, 2002	as United Sta	tes application Serial No	10/044,680	or PCT
Application Number	PCT/ _(if applicable)	filed	and was amended on	(MM/DD/YYYY)	
I hereby state that I had as amended by any an			ntents of the above-identification	ed specification, inc	cluding the claims,
I acknowledge the dup patentability as define		United States Pa	atent and Trademark Office	all information wh	nich is material to
or inventor's certificat United States of Ame	e or 365(a) of any Prica, listed below an ertificate or of any P	CT international did have also iden	§119 (a)-(d) or §365(b) of a all application which designatified below, by checking the lapplication having a filing	ated at least one cou the box, any foreign	untry other than the application for
Prior Foreign Application		Country		n Filing Date	PRIORITY
Number (s)			(MM/I	DD/YYYY))	CLAIMED
1.					
2. 3. 4. 5.					
4.					
5.					
I hereby claim the benefit unde	er Title 35, United S	tates Code §119	(e) of any United States pr	ovisional application	on(s) listed below:
Application N			ling Date (MM/DD/YYYY		
1. 60/262,580			01/17/2001		
2					
2					
4. ·			<u> </u>		
5.					

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PU4070US2

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION O	or PCT PARENT APPLICAT	ION			
		STATUS (Check one)			
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	
				<u></u>	
POWER OF ATTORNEY: As a named inventor, the U.S. Patent and Trademark Office connected there	23347) and/or agent(s) to prosect er)	ite this application and	d transact all business in	

PATENT TRADEMARK OFFICE

Send Correspondence to:

23347

PATENT TRADEMARK OFFICE

Direct Telephone Calls to:

Frank P. Grassler 919-483-2482

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	KEEFER	Christopher	E.
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	1	
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	YOUNG	Sidney	Stanley
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box]
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	XIA	Tai-he	
	INVENTOR'S	- 0:		DATE: March 11, 2002
	SIGNATURE	Ter In		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Montgomery	NJ	P.R. China
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	71 Southfield Drive	Montgomery	N.J. 08502 US